

**TEXAS DEPARTMENT OF HEALTH
BUREAU OF HIV AND STD PREVENTION
HIV SERVICES PROGRAM REVIEW**

DATE OF REVIEW:

CONTRACTOR :

LOCATION:

COUNTIES SERVED:

CONTRACT NUMBERS/CONTRACT PERIOD:

**RYAN WHITE II
STATE SERVICES**

AGENCY DIRECTOR:

HIV PROGRAM COORDINATOR:

REVIEWER(S):

A. ADMINISTRATION

1. Administrative Agency maintains and makes available for review an administrative folder containing the following:

- Current RFA (Ryan White and State Services)
- Current contracts (Ryan White and State Services)
- Completed applications for funding that include signed assurances, current negotiated budget, objectives and relevant subcontractor information (Ryan White and State Services)
- Administrative duties (performance standards)

Evaluation: Administrative documents on file.

Y N P

2. Budget revisions are submitted by the Administrative Agency as needed.

Evaluation: Budget review and report data.

Y N P

3. Actual cost of services match projections.

Evaluation: Financial status reports, reports to the Consortium on expenditures by services category.

Y N P

4. Current staff involved in HIV service delivery have access to, and are familiar with, the contents of the administrative folder. A signed statement is maintained in personnel/volunteer record stating that the contents of the administrative folder have been reviewed.

Evaluation: Documentation is maintained in personnel records.

Y N P

5. Are quarterly reports submitted on time?

Report due dates:

April 20	Y N
July 20	Y N
October 20	Y N
January 20	Y N

Comments:

Recommendations:

B. CONSORTIUM

1. The Administrative Agency maintains and makes available for review a Consortium folder that contains the following information:
- Current bylaws approved by voting Consortium members
 - Current Consortium membership list including elected officers
 - Minutes of all Consortium meetings
 - Minutes of all sub-committee meetings including the Executive Committee
 - Policy and procedure adopted by voting members
 - Needs Assessment process documents and results from the most current needs assessment process

Evaluation: Documents on file.

Y N P

2. The Administrative Agency provides periodic reports to the Consortium on the status of the HIV Service Plan, progress on program objectives, program problems, and the level of expenditure by service categories. The Consortium provides input on the development of applications for funding completed by the Administrative Agency.

Evaluation: Reports submitted to the Consortium.

Y N P

3. The Administrative Agency and the Consortium have a written Memorandum of Understanding agreement (MOU) that identifies specific roles and responsibilities.

Evaluation: MOU/MOA signed by Administrative Agency and Consortium executive committee which has been approved by voting membership of the Consortium.

Y N P

4. The Consortium has an established written process for the following:

- Recruitment of Consortium members
- Disseminating information regarding Consortium activity to clients (e.g. meeting announcements, minutes)
- Conducting a client-based needs assessment
- Internal review to establish service priorities based on documented need
- Resolution of grievances
- Implementation of service caps
- Selection of subcontractors

Evaluation: Review of the processes developed by the Consortium.

Y N P

Comments:

Recommendations:

C. SUBCONTRACTORS

1. The Administrative Agency has a documented system or policy to communicate with subcontractors. This system includes an established procedure for subcontractors to collect, store and report client information that is required for the COMPIS database.

Evaluation: Review of communication system (telephone conversations, meetings, correspondence) and COMPIS process.

Y N P

2. A system is in place for the Administrative Agency to monitor the performance of subcontractors on an annual basis or more frequently if needed. The system includes an instrument to record observations and recommendations for programmatic and financial management improvement as needed. Administrative Agency maintains documentation of monitoring visits conducted at subcontractor sites.

Evaluation: Review of monitoring process, evaluation instrument, and completed reviews.

Y N P

3. There is a documented system or policy for management of administrative complaints from subcontractors. Copies of complaints filed by subcontractors are kept on file.

Evaluation: Written policy or system.

Y N P

Comments:

Recommendations:

D. CLIENT SERVICES

1. Clients are requested to complete a client satisfaction survey at least once a year.

Evaluation: Client satisfaction survey.

Y N P

2. There is a system in place to assure that eligible clients have applied for Texas Medication Program.

Evaluation: Review of procedure or protocol for ensuring clients apply for Texas Medication Program (if appropriate).

Y N P

3. A Client Bill of Rights is supplied to each client. A Client Bill of Rights is displayed in Spanish and English in a common area of the facility

Evaluation: Signed acknowledgment of receipt is in client files; review of the facility.

Y N P

4. Mechanisms are in place to collect anonymous client comments and recommendations and to involve clients in the decision-making process.

Evaluation: Suggestion box is placed in the facility in a common area; evidence that persons who are HIV+ serve on the Board of Directors; evidence of an HIV+ advisory committee; evidence that the agency seeks client input through focus groups or work groups, etc.

Y N P

5. Agency uses client comments/recommendations and results from client satisfaction survey to evaluate and improve service delivery.

Evaluation: Review of client comments/recommendations and results from client satisfaction survey. Review of programmatic response.

Y N P

6. The Administrative Agency works to coordinate activities with other service agencies to ensure non-duplication of services as applicable. Documentation of mechanisms utilized to prevent duplication are available.

Evaluation: Written documentation of regular interagency meetings or case conferences where each agency's services are discussed.

Y N P

7. There is a policy and procedure in place for the handling of complaints from clients and their care givers regarding services provided by the agency or its subcontractors. All clients are informed of this grievance process. A signed statement verifying receipt of the procedure is included in the client file. At a minimum, the process must include the following:
- complaints regarding clinical services must be evaluated by a clinician with appropriate training and credentials to evaluate the quality of care
 - time lines are imposed for processing the complaint to ensure a rapid response
 - assurance that the process will be conducted in an impartial and timely manner
 - assurance that, if requested, client confidentiality will be protected during the process
 - assurance that clients and their care givers have the right to file and pursue grievances without fear of loss of service or any form of retaliation
 - assurance that the complainant will be provided with a written response regarding the result of the complaint
 - when there is or may be a conflict of interest in having a member of the agency staff review the complaint, the complaint should be referred to TDH to the Clinical Case Management Program (CCMP) for complaints regarding clinical and case management care, and to the Field Operations Branch regarding services other than clinical or case management
 - clients and care givers always have the right to file complaints directly with TDH.

Evaluation: Signed statement in client file.

Y N P

Comments:

Recommendations:

9/14/99